

Franklin County Building Department

Multi-Use Permit Application

INSTRUCTIONS: Complete and submit this application, along with the permit fee; **OR** mail to: Franklin County Building Department, 400 E. Locust St. Room 006, Union, MO 63084; 636-583-6384.
Fax number: 636-583-7381 Email: building@franklinmo.gov

Information on Property Owner:

Property Owner _____

Current Address _____

Phone Number _____

Email Address _____

Information on Building Site:

Subdivision Name: _____

Address: _____

Lot #(s) _____

Tax I.D. Parcel # _____

Type of Permit:

Electrical

New Upgrade/Modification Reconnect Existing Service

Electrical Service Amps _____

Utility Company _____

Premise # _____

Electrician's Name & Number: _____

Interior Wiring _____

Plumbing _____

Structure Type:

Residential

Garage, Detached

Manufactured House

Single Family

Storage Building

Utility Pole

Agricultural Building

Other _____

Non-Residential

Job Type _____

| |
|----------------------------------|
| Permit # _____ |
| Payment \$ _____ Receipt # _____ |

By application, I agree to follow the requirements set forth in the appropriate building code and to contact the Building Department for an inspection one workday prior to the needed inspection.

X _____

Signature of Applicant/Agent

_____ Date of Application

Contractor Information:

Name _____ Phone # _____

Address _____

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

X _____

Signature of Contractor

_____ Date of Application